

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. MODULAR  
First Inventor LARRY M. LEONE  
Title MODULAR WATER GARDEN  
Express Mail Label No. ET959565829 US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

## ADDRESS TO:

Mail Stop Patent Application  
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1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 27]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 6]
5. Oath or Declaration [Total Sheets 2]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63(d))  
(for continuation/divisional with Box 18 completed)
  - i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ Paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☒ 37 CFR 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: .....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: .....

Prior application information:

Examiner: .....

Art Unit: .....

For CONTINUATION OR DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

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Signature [Signature] Date 04/02/2004

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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|---|--|--|--|
| <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2004</h2> <p style="font-size: small; margin: 0;">Effective 10/01/2003. Patent fees are subject to annual revision.</p> |  | <b>Complete if Known</b>                   |  |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |  | Application Number                         |  |
|   |  | Filing Date                                |  |
|   |  | First Named Inventor <u>LARRY M. LEONE</u> |  |
|   |  | Examiner Name                              |  |
|   |  | Art Unit                                   |  |
| TOTAL AMOUNT OF PAYMENT (\$)  |  | 425.00                                     |  |
|   |  | Attorney Docket No. <u>MODULAR</u>         |  |

| METHOD OF PAYMENT (check all that apply)  | FEE CALCULATION (continued)  |              |              |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|---|--|--------------|--------------|--|-----------------|-----------------|----------|----------|----------|----------|----------|------|------|------|--------------------|-------------------------------------|------|------|------|------|-------------------|--|------|------|------|------|------------------|---------------------------|------|------|-------|------|--------------------|--|------|------|------|------|------------------------|--|--|------|--------|--------------|--------|---|--|----------|-----|--------------|----|--|--|------|-----|------|-----|---|----|---------|-----|------|-----|--|---|--------------------|-------|--------|-----|---|--|------|-------|--------------|-------|--|--|-----------------|----------|----------|----------|------------------|----------|------|-----|------|-----|--|--|------|-----|------|-----|-----------------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|--|--|------|-------|------|-----|--|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|----|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input type="checkbox"/> Deposit Account:<br>Deposit Account Number _____<br>Deposit Account Name _____<br><b>The Director is authorized to: (check all that apply)</b><br><input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments<br><input type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.   | <h3>3. ADDITIONAL FEES</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,330</td><td>2453</td><td>665</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,330</td><td>2501</td><td>665</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40</td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> </tbody> </table> | Large Entity |              | Small Entity   |                 | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051 | 130  | 2051 | 65                 | Surcharge - late filing fee or oath |      | 1052 | 50   | 2052 | 25                | Surcharge - late provisional filing fee or cover sheet |      | 1053 | 130  | 1053 | 130              | Non-English specification |      | 1812 | 2,520 | 1812 | 2,520              | For filing a request for <i>ex parte</i> reexamination |      | 1804 | 920* | 1804 | 920*                   | Requesting publication of SIR prior to Examiner action |  | 1805 | 1,840* | 1805         | 1,840* | Requesting publication of SIR after Examiner action |  | 1251     | 110 | 2251         | 55 | Extension for reply within first month |  | 1252 | 420 | 2252 | 210 | Extension for reply within second month |    | 1253    | 950 | 2253 | 475 | Extension for reply within third month |   | 1254               | 1,480 | 2254   | 740 | Extension for reply within fourth month |  | 1255 | 2,010 | 2255         | 1,005 | Extension for reply within fifth month |  | 1401            | 330      | 2401     | 165      | Notice of Appeal |          | 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal |  | 1403 | 290 | 2403 | 145 | Request for oral hearing          |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable                   |  | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional                         |  | 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) |  | 1502 | 480 | 2502 | 240 | Design issue fee |  | 1503 | 640 | 2503 | 320 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 40 | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  |
| Large Entity  |  | Small Entity |              | Fee Description  | Fee Paid        |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$)   | Fee Code     | Fee (\$)     |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1051  | 130  | 2051         | 65           | Surcharge - late filing fee or oath  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1052  | 50   | 2052         | 25           | Surcharge - late provisional filing fee or cover sheet                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1053  | 130  | 1053         | 130          | Non-English specification  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1812  | 2,520  | 1812         | 2,520        | For filing a request for <i>ex parte</i> reexamination                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1804  | 920*   | 1804         | 920*         | Requesting publication of SIR prior to Examiner action                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1805  | 1,840*   | 1805         | 1,840*       | Requesting publication of SIR after Examiner action                        |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1251  | 110  | 2251         | 55           | Extension for reply within first month                                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1252  | 420  | 2252         | 210          | Extension for reply within second month                                    |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1253  | 950  | 2253         | 475          | Extension for reply within third month                                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1254  | 1,480  | 2254         | 740          | Extension for reply within fourth month                                    |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1255  | 2,010  | 2255         | 1,005        | Extension for reply within fifth month                                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1401  | 330  | 2401         | 165          | Notice of Appeal   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1402  | 330  | 2402         | 165          | Filing a brief in support of an appeal                                     |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1403  | 290  | 2403         | 145          | Request for oral hearing   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1451  | 1,510  | 1451         | 1,510        | Petition to institute a public use proceeding                              |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1452  | 110  | 2452         | 55           | Petition to revive - unavoidable   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1453  | 1,330  | 2453         | 665          | Petition to revive - unintentional   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1501  | 1,330  | 2501         | 665          | Utility issue fee (or reissue)   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1502  | 480  | 2502         | 240          | Design issue fee   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1503  | 640  | 2503         | 320          | Plant issue fee  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1460  | 130  | 1460         | 130          | Petitions to the Commissioner  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1807  | 50   | 1807         | 50           | Processing fee under 37 CFR 1.17(q)  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1806  | 180  | 1806         | 180          | Submission of Information Disclosure Stmt                                  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 8021  | 40   | 8021         | 40           | Recording each patent assignment per property (times number of properties) | 40              |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1809  | 770  | 2809         | 385          | Filing a submission after final rejection (37 CFR 1.129(a))                |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1810  | 770  | 2810         | 385          | For each additional invention to be examined (37 CFR 1.129(b))             |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1801  | 770  | 2801         | 385          | Request for Continued Examination (RCE)                                    |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1802  | 900  | 1802         | 900          | Request for expedited examination of a design application                  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <h3>1. BASIC FILING FEE</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td>385</td></tr> <tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (1)</b> (\$) 385</p> | Large Entity   |              | Small Entity |  | Fee Description | Fee Paid        | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1001     | 770  | 2001 | 385  | Utility filing fee | 385                                 | 1002 | 340  | 2002 | 170  | Design filing fee |  | 1003 | 530  | 2003 | 265  | Plant filing fee |                           | 1004 | 770  | 2004  | 385  | Reissue filing fee |  | 1005 | 160  | 2005 | 80   | Provisional filing fee |  | <h3>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2"></th> <th colspan="2">Extra Claims</th> <th colspan="2">Fee from below</th> <th colspan="2">Fee Paid</th> </tr> <tr> <th>Total Claims</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>Independent Claims</td> <td>11</td> <td>-20** =</td> <td>0</td> <td>X</td> <td></td> <td>=</td> <td>0</td> </tr> <tr> <td>Multiple Dependent</td> <td>3</td> <td>-3** =</td> <td>0</td> <td>X</td> <td></td> <td>=</td> <td>0</td> </tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> </tbody> </table> <p style="text-align: right;"><b>SUBTOTAL (2)</b> (\$) 0</p> |      |        | Extra Claims |        | Fee from below                                      |  | Fee Paid |     | Total Claims |    |  |  |      |     |      |     | Independent Claims                      | 11 | -20** = | 0   | X    |     | =                                      | 0 | Multiple Dependent | 3     | -3** = | 0   | X                                       |  | =    | 0     | Large Entity |       | Small Entity                           |  | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code         | Fee (\$) | 1202 | 18  | 2202 | 9   | Claims in excess of 20                 |  | 1201 | 86  | 2201 | 43  | Independent claims in excess of 3 |  | 1203 | 290   | 2203 | 145   | Multiple dependent claim, if not paid         |  | 1204 | 86  | 2204 | 43 | ** Reissue independent claims over original patent |  | 1205 | 18    | 2205 | 9   | ** Reissue claims in excess of 20 and over original patent |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |  | Small Entity |              | Fee Description  |                 |                 | Fee Paid |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$)   | Fee Code     | Fee (\$)     |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1001  | 770  | 2001         | 385          | Utility filing fee   | 385             |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1002  | 340  | 2002         | 170          | Design filing fee  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1003  | 530  | 2003         | 265          | Plant filing fee   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1004  | 770  | 2004         | 385          | Reissue filing fee   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1005  | 160  | 2005         | 80           | Provisional filing fee   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
|   |  | Extra Claims |              | Fee from below   |                 | Fee Paid        |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Total Claims  |  |              |              |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Independent Claims  | 11   | -20** =      | 0            | X  |                 | =               | 0        |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Multiple Dependent  | 3  | -3** =       | 0            | X  |                 | =               | 0        |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Large Entity  |  | Small Entity |              | Fee Description  | Fee Paid        |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| Fee Code  | Fee (\$)   | Fee Code     | Fee (\$)     |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1202  | 18   | 2202         | 9            | Claims in excess of 20   |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1201  | 86   | 2201         | 43           | Independent claims in excess of 3  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1203  | 290  | 2203         | 145          | Multiple dependent claim, if not paid                                      |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1204  | 86   | 2204         | 43           | ** Reissue independent claims over original patent                         |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| 1205  | 18   | 2205         | 9            | ** Reissue claims in excess of 20 and over original patent                 |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |
| <b>SUBTOTAL (3)</b> (\$) 40   |  |              |              |  |                 |                 |          |          |          |          |          |      |      |      |                    |                                     |      |      |      |      |                   |  |      |      |      |      |                  |                           |      |      |       |      |                    |  |      |      |      |      |                        |  |  |      |        |              |        |   |  |          |     |              |    |  |  |      |     |      |     |   |    |         |     |      |     |  |   |                    |       |        |     |   |  |      |       |              |       |  |  |                 |          |          |          |                  |          |      |     |      |     |  |  |      |     |      |     |                                   |  |      |       |      |       |   |  |      |     |      |    |  |  |      |       |      |     |  |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |    |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |

|                     |                           |                                   |              |
|---------------------|---------------------------|-----------------------------------|--------------|
| <b>SUBMITTED BY</b> |                           | (Complete if applicable)          |              |
| Name (Print/Type)   | KENNETH E. KUFFNER        | Registration No. (Attorney/Agent) | 24508        |
| Signature           | <i>Kenneth E. Kuffner</i> | Telephone                         | 832 418-0321 |
|                     |                           | Date                              | 2 APRIL 2004 |

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April 2, 2004

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[Signature]  
Signature

2 April 2004  
Date of Signature

Re: New U.S. Patent Application  
Entitled: Modular Water Gardens  
Our File: 29600.00001

Dear Sir:

Transmitted herewith for filing is a United States Patent Application with the following particulars:

TITLE: MODULAR WATER GARDEN CONSTRUCTION

INVENTOR: LARRY M. LEONE

Enclosed are: [ X ] 27 sheets of Specification, including Claims, and Abstract.  
[ X ] 6 sheets of drawings.  
[ X ] Declaration and Power of Attorney.  
[ X ] Assignment document, w/cover.  
[ X ] Statement under 37 CFR 3.77(b)

Applicants and their assignee claim small entity status for fee purposes and a Fee calculation sheet is enclosed.

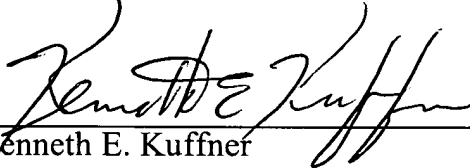
A check in the amount of \$ 385.00 is enclosed for the basic fee and a separate

check in the amount of \$ 40.00 for the recordation of assignment is enclosed.

Please address all correspondence in connection with this application to the address shown below.

Please date stamp and return the enclosed postcard to acknowledge receipt of same.

Respectfully submitted,



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Enclosures